May 2005

Health Data Reporter

Health Insurance Status of Nebraskans Liyan Xu, M.S., Jane L. Meza, Ph.D., and Keith J. Mueller, Ph.D.

Executive Summary

In this report, we describe the health insurance status of Nebraskans—who has health insurance and who does not. Because Medicare covers virtually all those aged 65 and older, we focus on Nebraskans under age 65. Data from the Nebraska 2004 household survey¹ were used to summarize health insurance status. describe uninsured individuals with lower household income in detail, and answer the following questions: Who did not have health insurance, why were they uninsured, and who might benefit from state-level policy changes designed to address the problem of uninsurance?

Key Findings

Among nonelderly Nebraskans,

- Approximately 145,000 (9.9%) lacked health insurance coverage at some time during 2004.
- Approximately 10% of the uninsured respondents reported that they were reluctant to buy health insurance at any cost.

- Approximately 93% of the poor (household income at or below 200% of the federal poverty level [FPL]²) uninsured respondents would enroll in a public program if they were eligible.
- Approximately 79% of the uninsured respondents were individuals with household income at or below 300% FPL.
- The majority of the uninsured with household income at or below 300% of the FPL were
 - o White non-Hispanic (78%).
 - o Employed or self-employed (69% of adults aged 18 through 64).
 - o Individuals with a high school education or less (59% of adults aged 25 through 64).
 - o Working in businesses employing 50 or fewer workers (57% of uninsured working adults).
 - o Living in rural areas (63%).

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Part I: Uninsured Nebraskans Under Age 65

The typical uninsured Nebraskan under age 65 was

- Low-income—at or below 200% of the FPL (63% of the uninsured, or approximately 91,000 persons)
- Aged 19 to 34 (39% of the uninsured, or approximately 57,000 persons)
- Uninsured for at least one year (70% of the uninsured, or approximately 101,000 persons)
- White non-Hispanic (79% of the uninsured, or approximately 116,000 persons)
- Employed or self-employed (63% of uninsured adults aged 18 to 64, or approximately 73,000 persons). Among uninsured working adults, 63% worked for a small business (50 or fewer employees).

Reasons for Uninsurance

Approximately 145,000 Nebraskans (9.9%) under age 65 lacked health insurance coverage at some time during 2004. Approximately 10% of uninsured respondents did not want to seek health insurance for one or more of the following reasons: they were rarely sick, they did not know where to start to obtain health insurance, or there was too much hassle/paperwork. This group of uninsured reported *reluctance to buy health insurance at any cost*. In contrast, 65% of the nonelderly uninsured said they had not purchased health insurance because it was too expensive, suggesting that they *would be willing to buy health insurance if it was affordable* (Figure 1).

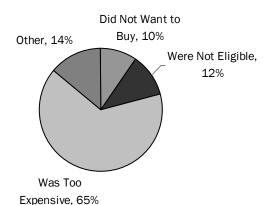


Figure 1. Reasons for Uninsurance Among the Nonelderly, 2004 Nebraska Household Survey

Uninsurance and Household Income

The uninsured were primarily from low-income households (incomes at or below 200% of the FPL) and were usually ineligible for public insurance programs. When persons in this cohort were asked whether they would like to enroll in a public insurance program, approximately 93% said they would, if they were eligible.

Individuals with household income above 200% of the FPL constitute about 37% of the uninsured population in Nebraska. This group was unlikely to obtain insurance subsidies from government or to be covered by public health insurance.

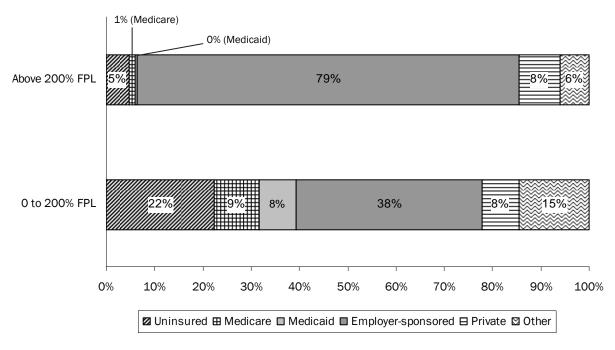


Figure 2. Major Sources of Insurance Coverage for Nonelderly Nebraskans by Household Income, 2004 Nebraska Household Survey

We compared insurance status between persons in households with incomes above 200% of the FPL and those below to provide information to policy makers working to extend health insurance coverage for uninsured Nebraskans. Those in households with incomes above 200% of the FPL were twice as likely to have employment-based insurance as were low-income individuals (79% of those above 200% of the FPL vs. 38% of those at or below 200% of the FPL). Even though Medicare and Medicaid filled a gap for many low-income individuals, 22% were uninsured, compared to only 5% of individuals with household income above 200% of the FPL.

Uninsured Young Adults

Young adults aged 19 to 24 constituted 22% of the nonelderly uninsured in Nebraska. Compared to nonelderly adults over age 24, young adults were more likely living in households with incomes at or below 300% of the FPL (68% of young adults vs. 49% of those aged 25 to 34, 37% of those aged 35 to 54, and 32% of those aged 55 to 64). A higher percentage of uninsured young adults aged 19 to 34³ believed that they did not need or did not want to buy insurance (11% for young adults vs. 1% for all others).

Uninsurance and Business Size

The majority (63%) of uninsured adults aged 18 to 64 were employed or self-employed. The remaining 37% were unemployed (29%), full-time students (6%), and others (2%). Among uninsured working adults, more than half (63%) were working for a small business with 50 or fewer employees.

Part II: Characteristics of Uninsured Nebraskans Under Age 65 with Household Income At or Below 300% of the Federal Poverty Level

Very few Nebraskans under age 65 who reside in households with incomes above 300% of the FPL were uninsured: only about 4%, or approximately 29,700 persons. People with household income above 300% of the FPL comprise about 21% of the nonelderly uninsured in Nebraska. Ninety-six percent of this group reported their health status to be excellent or good, and only about 4% reported fair or poor health status. We assume that people in households with incomes above 300% of the FPL who are in good or excellent health are uninsured for reasons other than not having access to affordable health insurance.

Of the 3,750 respondents for the Nebraska 2004 Household Survey, information on insurance status was available for 1,259 respondents younger than 65 years old and with a household income at or below 300% of the FPL. Two hundred forty-one (241) respondents reported that they did not have health insurance at the time of interview. More than half (53%) of the respondents were covered by employment-based health insurance, 11% were covered by Medicare or Medicaid, and 20% were covered by private or other health insurance, with the overall uninsurance percentage for this population about 16% (Figure 3).

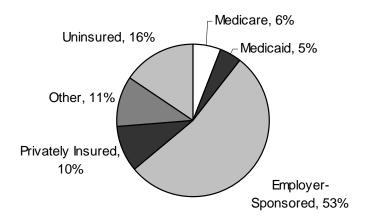
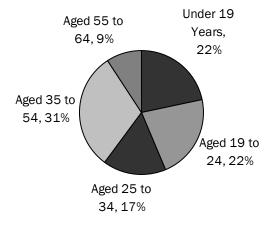


Figure 3. Insurance Types for Nonelderly Nebraskans With Household Income at or Below 300% of the FPL, 2004 Nebraska Household Survey

In the following sections, we will consider the nonelderly uninsured with household income at or below 300% of the FPL by age, health status, race/ethnicity, employment status, educational level, and region.

Uninsurance and Age

Adults aged 19 to 24 years accounted for 22% of the nonelderly uninsured in Nebraska who earned 300% or less of the FPL (Figure 4). The uninsurance percentage was highest among young adults aged 19 to 24 years (30%), followed by adults aged 35 to 54 years (19%), and adults aged 55 to 64 years (18%) (Figure 5).



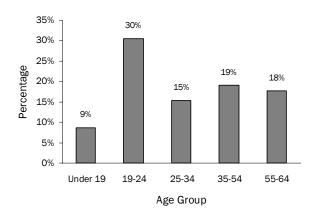


Figure 4. Distribution of Uninsured by Age

Figure 5. Uninsurance Percentage by Age

Uninsurance and Health Status

Among the nonelderly uninsured who earned 300% or less of the FPL, the uninsured percentage was highest among respondents who reported their health as fair or poor (24%), followed by individuals who reported good health (22%) (Figure 7).

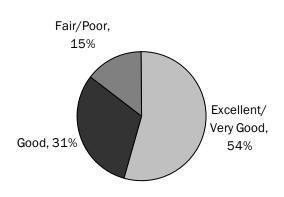
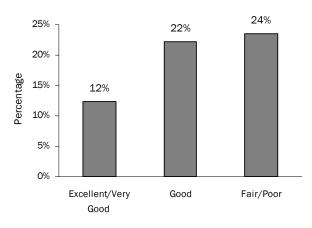


Figure 6. Distribution of the Uninsured by Self-Reported Health Status

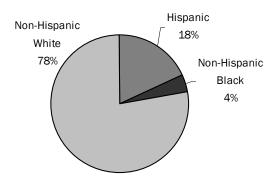


Self-Reported Health Status

Figure 7. Uninsurance Percentage by Self-Reported Health Status

Uninsurance and Race/Ethnicity

Non-Hispanic Whites constituted 78% of all nonelderly uninsured in Nebraska who earned 300% or less of the FPL (Figure 8). The uninsurance percentage was highest among Hispanics (28%), followed by non-Hispanic Blacks (17%). The uninsurance percentage for non-Hispanic Whites was 14% (Figure 9).





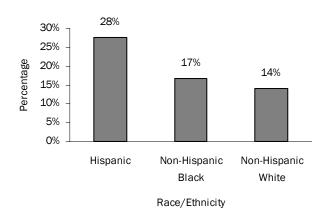


Figure 9. Uninsurance Percentage by Race/Ethnicity

Uninsurance and Employment Status

Of uninsured adults who earned 300% or less of the FPL, 58% were employed (Figure 10). More than a quarter (27%) of unemployed adults aged 18 to 64 years who earned 300% or less of the FPL did not have health insurance (Figure 11).

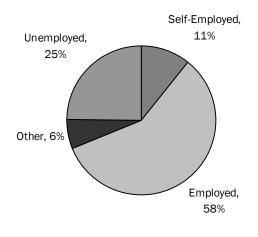


Figure 10. Distribution of Uninsured by Employment Status

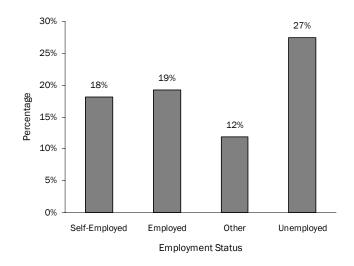
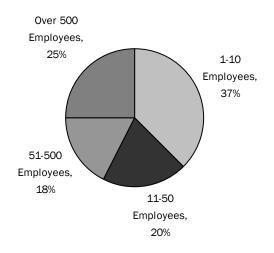


Figure 11. Uninsurance by Employment Status

Among those who were employed and earned 300% or less of the FPL, more than half (57%) of the uninsured were from small businesses (50 or fewer employees), and about 37% of the uninsured were employed in businesses with ten or fewer workers (Figure 12). As the business size increased, the uninsured percentage decreased, as shown in Figure 13.



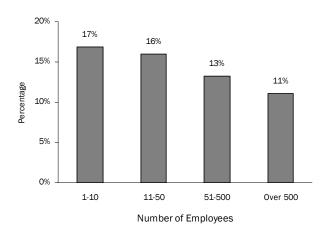
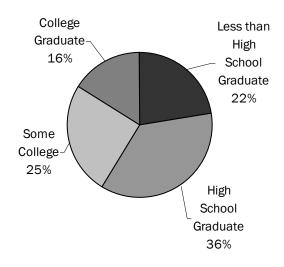


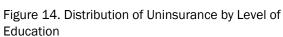
Figure 12. Distribution of Uninsured by Business Size (Number of Employees)

Figure 13. Uninsurance Percentage by Business Size (Number of Employees)

Uninsurance and Educational Level

Among the nonelderly uninsured who earned 300% or less of the FPL, adults with less than a high school degree had the highest percentage of uninsurance (35%), followed by high school graduates (17%) (Figure 15).





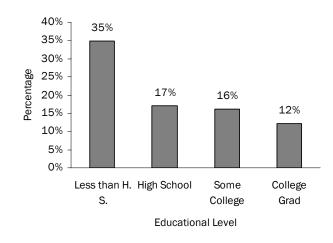
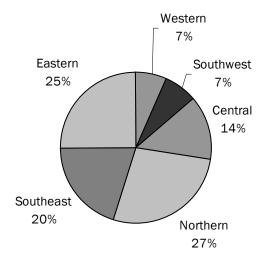


Figure 15. Uninsurance Percentage by Level of Education

Uninsurance and Region

The uninsurance percentage for those earning 300% or less of the FPL was similar across Nebraska's six Health Planning Regions. The East, Southeast, and Northern areas constituted about three-quarters (73%) of the uninsured (Figure 17).



20% 18% 16% 16% 15% 14% 14% 15% Percentage 10% 5% 0% Northern Southeast Eastern Western Southwest Central Region

Figure 16. Distribution of Uninsured by Health Planning Region

Figure 17. Uninsurance Percentage by Health Planning Region

Rural areas constituted about 63% of the nonelderly poor uninsured in Nebraska (Figure 18). In addition, the uninsurance percentage was higher in rural areas than in urban areas (17% uninsured for rural areas vs. 14% uninsured for urban areas) (Figure 19).

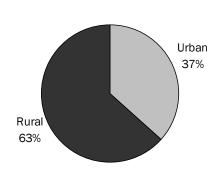


Figure 18. Distribution of Uninsured Residents by Rural and Urban Areas

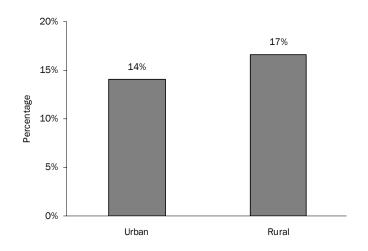


Figure 19. Uninsurance Percentage for Residents in Rural and Urban Areas

Notes

1. The Nebraska 2004 Household Survey was a stratified random-digit-dial telephone survey sponsored by the U.S. Department of Health and Human Services' Health Resources and Services Administration State Planning Grants Program. The survey was conducted by the University of Nebraska Medical Center between March 10, 2004, and May 8, 2004, in both English and Spanish. Hispanics and African-Americans were over-sampled. The total response rate was 67%, and the total sample size was 3,750.

2. 2003 Federal Poverty Level (FPL) Income Guidelines

Family Size	100% FPL	200 % FPL	300% FPL
1	\$8,980	\$17,960	\$26,940
2	\$12,120	\$24,240	\$36,360
3	\$15,260	\$30,520	\$45,780
4	\$18,400	\$36,800	\$55,200
5	\$21,540	\$43,080	\$64,620
6	\$24,680	\$49,360	\$74,040
7	\$27,820	\$55,640	\$83,460
8	\$30,960	\$61,920	\$92,880

- 3. We used the age range 19 to 34 rather than 19 to 24 to achieve a sufficient number to obtain a reliable estimate.
- 4. The Nebraska Health and Human Services System collects and compiles health data for the state at the county level. This data is then aggregated to six Health Planning Regions (Western, Southwest, Central, Northern, Southeast, and Eastern). The data is then further aggregated for administrative purposes to three Health Service Areas (Western, Central, and Eastern).
- 5. Urban areas include Cass, Dakota, Douglas, Lancaster, Sarpy, and Washington counties. Rural areas are defined as all counties not otherwise defined as urban.

Nebraska Health Information Project

The Nebraska Health Information Project is a partnership made possible with the financial support of the State of Nebraska and through additional personnel and other resources provided by the University of Nebraska Medical Center. While initiated by the Nebraska Unicameral, the ongoing success of the project results from cooperation and collaboration among a number of organizations and individuals, particularly those involved in delivering health care services, financing health care, and analyzing health-related data.

Other reports have been published by the Nebraska Health Information Project, including biennial databooks that present Nebraska health and demographic data at the county, area, and state levels. To find out more about these and future reports, visit our home page at http://www.unmc.edu/nebraska

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